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October 1991

ATTACHMENT 4.22-C
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OMB No.:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State/Territory: NEW MEXICO

Citation	Condition or Requirement
1906 of the Act	State Method on Cost Effectiveness of Employer-Based Group Health Plans

TN No. 91-19 Supersedes Approval Date JAN 15 1992 Effective Date OCT 1 1991

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* U.S. Government Printing Office : 1991 - 312-149/40352

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